

ISSUE SLIP STAPLE AREA (for additional cross references)

SECTION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	10-03-01
O.J.P.E. CLASSIFIER	<i>[Signature]</i>	<i>[Signature]</i>	10/19
FORMALITY REVIEW	M.H.	1102	11-01-01
RESPONSE FORMALITY REVIEW	AM	917	04-18-02

INDEX OF CLAIMS

- Rejected
 - Allowed
 - (Through numeral) - Cancelled
 - Restricted
 N - Non-elected
 I - Interference
 A - Appeal
 O - Objected

Claim	Date
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Best Available Copy

50-839
11/12

1112
9-18-02

If more than 150 claims or 10 actions
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